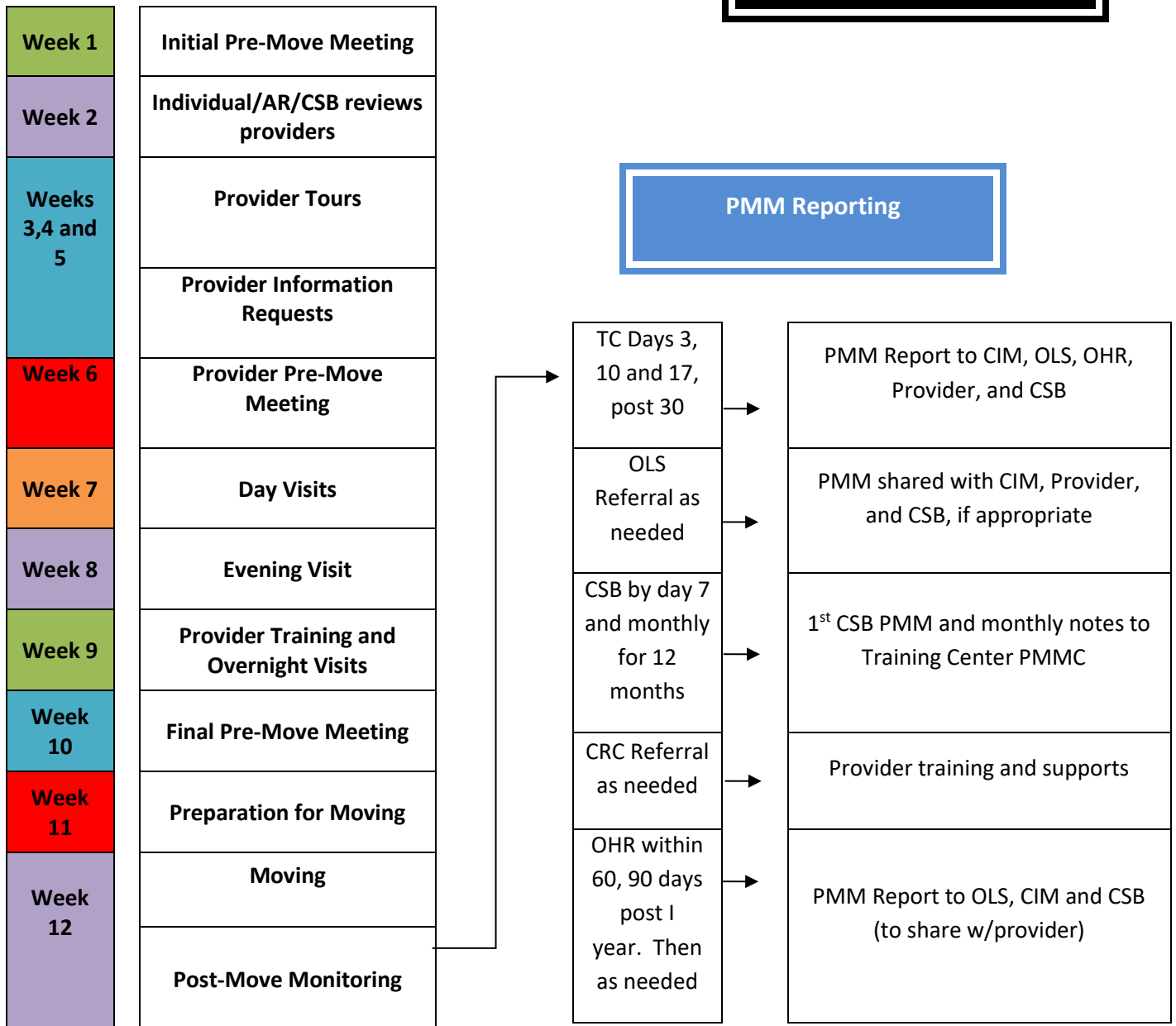


## Active Move Status

## Virginia's Training Center to Community Move Process

## PMM Reporting



	Individual/AR	Training Center	CSB	Provider	CIM/DCM	OL	CRC	OHR
Provider Survey Process*			Completes <b><u>Individual Profile</u></b>	Completes <b><u>Provider Survey</u></b> to be considered				
Week 1	Initial Pre-Move Meeting*	Initial Pre-Move Meeting*	Initial Pre-Move Meeting*		Monitors active move list Reviews			
	<b><u>Discharge Plan/ Discussion Record</u></b> (developed or revised) Completed within 48 hours and sent to the CSB, Provider and AR within 72 hours.	<b><u>Discharge Plan/ Discussion Record</u></b> (developed or revised) <b>Assess DME needs</b>	<b><u>Discharge Plan/ Discussion Record</u></b> (developed or revised)		<b><u>Discharge Plan/ Discussion Record</u></b>			
			CSB SC participates in initial meeting, provides 3 potential provider options, confirms consent for Individual Needs Profile (LISCP) and individual entered into survey, works with TC to coordinate referrals for		Sends to Provider, CSB and AR and posts for CO access			

\* denotes primary task detailed in additional chart. Documents are **bold underlined**.

\*\* In the event of barriers to D/C, a special circumstance meeting will occur and an RST referral may be initiated.

	Individual/AR	Training Center	CSB	Provider	CIM/DCM	OL	CRC	OHR
			DARS, REACH as applicable.					
Week 2	Choose providers to tour	Coordinates TC and Individual attendance at provider tours  Schedule tours with Individual/AR/TC/Family/Providers	CSB SC gives <b><u>Provider Profiles</u></b> to individual/ AR					
Week 3	Provider Tours	Provider Tours	Provider Tours	Host Tours				
Week 4	Provider Tours	Provider Tours	Provider Tours	Host Tours				
Week 5	<b>Provider Tours</b>	<b>Provider Tours</b>	<b>Provider Tours</b>	<b>Host Tours</b>	If barriers to discharge are identified, steps to overcome the barriers will be identified and implemented.			
	Choose Provider	Communicate Chosen Provider to CSB	Communicate Chosen Provider to TC	Confirm Attendance at Pre-Move Meeting with CSB				
Week 6	Provider Pre-Move Meeting*/**	Provider Pre-Move Meeting*/** Confirm procurement method for DME	Provider Pre-Move Meeting*/** [Confirm provider choice – 5 beds, etc.]	Onsite observation/Shadowing  Provider Pre-Move Meeting*/**	Pre-Move Meeting*/** [review 5+beds/NF/ICF] After Provider Chosen Submits	Receives and responds to <b><u>Request for Provider Information if there are</u></b>	Receives and responds to <b><u>Request for Provider Information w/in 3-5 days</u></b>	Attends all Provider Pre-Move Meeting* Receives and responds to <b><u>Request for</u></b>

\* denotes primary task detailed in additional chart. Documents are **bold underlined**.

\*\* In the event of barriers to D/C, a special circumstance meeting will occur and an RST referral may be initiated.

	Individual/AR	Training Center	CSB	Provider	CIM/DCM	OL	CRC	OHR
			CSB SC to schedule intake/PCP with provider, AR, and individual to occur by final pre-move meeting.		<b><u>Request for Provider Information</u></b>	<b><u>potential concerns</u></b> OL Provider Site Visit if OL determines necessary		<b><u>Provider Information w/in 3-5 days</u></b> Possible OHR Provider Site Visit
Week 7	Day Visits	Day Visits		Day Visits				
Week 8	Evening Visit	Evening Visit		Evening Visit				
Week 9	Overnight/Weekend Visit	Provider Training		Receive Training Overnight/Weekend Visit Submit <b><u>Plan for Supports and Exceptional Supports Rate App</u></b> to CSB				
Week 10	Final Pre-Move Meeting*/**	Final Pre-Move Meeting*	Final Pre-Move Meeting* Review Provider <b><u>Plan for Supports, Exceptional Support Rates, Waiver ISARs</u></b> submitted via IDOLS	Final Pre-Move Meeting* [confirm PFS meets essential supports]				

\* denotes primary task detailed in additional chart. Documents are **bold underlined**.

\*\* In the event of barriers to D/C, a special circumstance meeting will occur and an RST referral may be initiated.

	Individual/AR	Training Center	CSB	Provider	CIM/DCM	OL	CRC	OHR
Week 11	Preparation for Moving	Preparation for Moving Additional Provider Site Review if needed*	Additional Provider Site Review if needed*	Preparation for Moving		Week 11	Preparation for Moving	Preparation for Moving
Week 12	Moving	Moving	CSB gives TC final copy of CSB and provider <b><u>PCP/ISPs</u></b>	Moving				
Month 1		PMM Visit on Day 3* PMM Visit on Day 10* PMM Visit on Day 17*	PMM Visit by Day 7*					<b>PMM Visits within 1<sup>st</sup> month</b>
Month 2			Monthly PMM Visits*			PMM Visit by referral	PMM Visit by referral	PMM Visits* as needed
Month 3			Monthly PMM Visits*			PMM Visit by referral	PMM Visit by referral	PMM Visit

\* denotes primary task detailed in additional chart. Documents are **bold underlined**.

\*\* In the event of barriers to D/C, a special circumstance meeting will occur and an RST referral may be initiated.

Primary Tasks and Core Responsibilities			
Task	Purpose	Roles	Core Responsibilities
Provider Survey Process	<ul style="list-style-type: none"> <li>To support individual choice and better ensure a good match between individual and provider.</li> </ul>	<ul style="list-style-type: none"> <li>Individual/AR</li> </ul>	<ul style="list-style-type: none"> <li>Provide CSB SC with residential and need preferences to complete profile in the <u>List of Individuals Seeking Community Services Providers</u> survey.</li> </ul>
		<ul style="list-style-type: none"> <li>CSB SC</li> </ul>	<ul style="list-style-type: none"> <li>All individuals from TC and all individual's moving per fiscal year should be placed in the <u>List of Individuals Seeking Community Services Providers</u> survey. CSB SC will obtain consent to place individuals on the <u>List of Individuals Seeking Community Services Providers</u>.</li> <li>Complete "<b><u>Individuals Seeking Community Services Providers</u></b>" online at <a href="https://www.surveymonkey.com/s/DTPM7TQ">https://www.surveymonkey.com/s/DTPM7TQ</a>.</li> </ul>
		<ul style="list-style-type: none"> <li>Providers</li> </ul>	<ul style="list-style-type: none"> <li>Providers wishing to be considered <b>MUST complete the short Provider Survey</b> located on Survey Monkey at <a href="https://www.surveymonkey.com/s/YZKFJC8">https://www.surveymonkey.com/s/YZKFJC8</a> before contacting the CSB contact listed.</li> <li>If interested, the provider then sends an email to the CSB contact requesting a call to the provider to speak further about the details of the individual's needs. (Ask OLS about license addendums for additional supports)</li> </ul>
Initial Pre-Move Meeting	<ul style="list-style-type: none"> <li>The meeting held that signifies the beginning of the "active move" process.</li> </ul>	<ul style="list-style-type: none"> <li>Individual/AR</li> </ul>	<ul style="list-style-type: none"> <li>Attends and helps facilitate meeting</li> </ul>
		<ul style="list-style-type: none"> <li>PST</li> </ul>	<ul style="list-style-type: none"> <li>Develops or updates the <b><u>Discharge Plan/Discussion Record</u></b>;</li> <li>Discuss individual specific training that will need to be provided;</li> </ul>

\* denotes primary task detailed in additional chart. Documents are **bold underlined**.

\*\* In the event of barriers to D/C, a special circumstance meeting will occur and an RST referral may be initiated.

Primary Tasks and Core Responsibilities			
Task	Purpose	Roles	Core Responsibilities
			<ul style="list-style-type: none"> <li>Discuss discharge specific tasks and identification of the responsible parties.</li> </ul>
		<ul style="list-style-type: none"> <li>CSB SC</li> </ul>	<ul style="list-style-type: none"> <li>Begin gathering documents needed for CSB intake process (Packet of Information from TC).</li> <li>Obtain <b><u>PCP/ISP and Supports Intensity Scale long report</u></b> from Training Center.</li> <li>Before or at the meeting, provide at least 3 <b><u>Provider Profile</u></b> options profiles to individual/AR for review when desired.</li> <li>Before or at the meeting, obtain written agreement for <b><u>disclosure of information</u></b> and schedule tours at individual and family request.</li> </ul>
		<ul style="list-style-type: none"> <li>DCM/CIM</li> </ul>	<ul style="list-style-type: none"> <li>Attend Meetings as possible to provide oversight and guidance</li> <li>Complete QA of meeting process</li> </ul>
Tours	<ul style="list-style-type: none"> <li>To provide individual/AR opportunity to visit providers, meet individuals currently being served, meet staff, and for both</li> </ul>	<ul style="list-style-type: none"> <li>Individual/AR</li> </ul>	<ul style="list-style-type: none"> <li>Choose to tour on own or with the CSB SC or TC staff.</li> <li>Decide on tour sites by contacting CSB and/or TC or in the initial pre-move meeting (following preliminary in-person screening).</li> </ul>
		<ul style="list-style-type: none"> <li>CSB SC</li> </ul>	<ul style="list-style-type: none"> <li>Attend tours with individual/AR unless requested not to attend.</li> </ul>

\* denotes primary task detailed in additional chart. Documents are **bold underlined**.

\*\* In the event of barriers to D/C, a special circumstance meeting will occur and an RST referral may be initiated.

Primary Tasks and Core Responsibilities			
Task	Purpose	Roles	Core Responsibilities
	parties to ask questions related to what is important to/for the individual.	<ul style="list-style-type: none"> <li>Training Center</li> </ul>	<ul style="list-style-type: none"> <li>Attend tours with individual/AR</li> <li>Provide transportation and support to individual during the tour</li> <li>Ensure essential supports are being met during tours</li> </ul>
Provider Information Request	<ul style="list-style-type: none"> <li>Once provider has been selected to visit, used to gain additional information regarding provider's readiness for providing support to individuals</li> </ul>	<ul style="list-style-type: none"> <li>DCM/CIM or designee</li> </ul>	<ul style="list-style-type: none"> <li>Send out <b><u>Provider Information Request</u></b> to the contact person at OLS, OHR, and CRC.</li> <li>If warranted, CIM shares results with TC and with CSB. CSB will share information with individual/AR.</li> <li>If Individual/AR chooses a less integrated setting as defined by SA, CIM will ensure information; referrals and choices have been provided.</li> <li>If Training Center is chosen, CIM will ensure TC transfer protocol has been followed.</li> </ul>
		<ul style="list-style-type: none"> <li>OL</li> </ul>	<ul style="list-style-type: none"> <li>If OL deems necessary, Review of homes and comments will be completed within 3-5 days of request.</li> </ul>
		<ul style="list-style-type: none"> <li>OHR</li> </ul>	<ul style="list-style-type: none"> <li>Review of homes and comments will be completed within 3-5 days of request.</li> </ul>
		<ul style="list-style-type: none"> <li>CRC</li> </ul>	<ul style="list-style-type: none"> <li>Review of homes and comments will be completed within 3-5 days of request.</li> </ul>

\* denotes primary task detailed in additional chart. Documents are **bold underlined**.

\*\* In the event of barriers to D/C, a special circumstance meeting will occur and an RST referral may be initiated.



Primary Tasks and Core Responsibilities			
Task	Purpose	Roles	Core Responsibilities
Provider Pre-Move Meeting	<ul style="list-style-type: none"> <li>To plan for the move to a chosen provider.</li> </ul>	<ul style="list-style-type: none"> <li>Individual/AR</li> </ul>	<ul style="list-style-type: none"> <li>Attends and helps facilitate meeting</li> </ul>
		<ul style="list-style-type: none"> <li>PST</li> </ul>	<ul style="list-style-type: none"> <li>Review <b><u>Discharge Plan and Discussion Record</u></b> and change as appropriate</li> <li>Identify specific tasks and responsible party</li> <li>Discuss and schedule training provider will need</li> <li>Determine and arrange modifications</li> <li>Arrange shadowing for the provider</li> <li>Schedule a series of trial visits to evaluate the individual's response to the new environment and how well his or her needs are met there; and</li> <li>Distribute current <b><u>discharge packet</u></b> including prescriptions and physician's orders, but without pending medical information, to CSB SC and to provider.</li> </ul>
		<ul style="list-style-type: none"> <li>CSB SC</li> </ul>	<ul style="list-style-type: none"> <li>Determine method of Waiver slot access (i.e. Money Follows the Person; Waiver Slot).</li> <li>Schedule intake/PCP meeting with provider, individual/AR to occur by the final pre-move meeting. (Complete the <b><u>essential information</u></b> [EI], edit the <b><u>Personal Profile</u></b>; develop the <b><u>Shared Plan</u></b> and sign <b><u>Agreements</u></b>. Share <b><u>EI</u></b>, <b><u>Personal Profile</u></b>, <b><u>Shared Plan</u></b> and <b><u>Agreements</u></b> with chosen providers for their use in <b><u>Plan for Supports</u></b> development, which might be a <b><u>60-Day Assessment PFS</u></b>).</li> <li>If using MFP, complete <b><u>Quality of Life Survey</u></b> and <b><u>MFP Enrollment</u></b>; request <b><u>Transition Services</u></b> funding for all individuals in the transition process.</li> </ul>

\* denotes primary task detailed in additional chart. Documents are **bold underlined**.

\*\* In the event of barriers to D/C, a special circumstance meeting will occur and an RST referral may be initiated.

Primary Tasks and Core Responsibilities			
Task	Purpose	Roles	Core Responsibilities
			<ul style="list-style-type: none"> <li>Identify and ensure scheduling with individual/AR: Community Psychiatric, Medical, Behavioral Providers and Pharmacy</li> </ul>
		<ul style="list-style-type: none"> <li>DCM/CIM</li> </ul>	<ul style="list-style-type: none"> <li>Reviews based on criteria established in SA</li> <li>Monitors Time lines are being met or justified.</li> </ul>
		<ul style="list-style-type: none"> <li>Provider</li> </ul>	<ul style="list-style-type: none"> <li>As needed, provide alternative ideas for meeting individual's needs.</li> <li>Determine within own agency and share who will be the best people to attend trainings</li> <li>Share training plan to ensure training received at TC is shared with all staff supporting the individual</li> </ul>
		<ul style="list-style-type: none"> <li>OHR</li> </ul>	<ul style="list-style-type: none"> <li>Serves as a resource for meetings to provide information related to informed consent, and responsibilities of Authorized Representatives</li> </ul>
		<ul style="list-style-type: none"> <li>Training Center Discharge Coordinator or designee</li> </ul>	<ul style="list-style-type: none"> <li>Ensures trainings are scheduled</li> <li>Ensures <b><u>discharge packet</u></b> is given to CSB and provider</li> <li>Coordinates visits with provider</li> <li>Coordinates all necessary equipment, medication, etc. is available for visits, as needed</li> <li>Notifies all internal departments about visit schedule</li> <li>Ensures all training has been completed prior to unattended visits</li> </ul>

\* denotes primary task detailed in additional chart. Documents are **bold underlined**.

\*\* In the event of barriers to D/C, a special circumstance meeting will occur and an RST referral may be initiated.

Primary Tasks and Core Responsibilities			
Task	Purpose	Roles	Core Responsibilities
Visits to Provider location	<ul style="list-style-type: none"> <li>Day, evening and weekend overnight visits to chosen provider location to confirm good fit and ability to support.</li> </ul>	<ul style="list-style-type: none"> <li>Individual/AR</li> </ul>	<ul style="list-style-type: none"> <li>Participates in activities of the home. Chance to get to know supports and support partners.</li> </ul>
		<ul style="list-style-type: none"> <li>CSB SC</li> </ul>	<ul style="list-style-type: none"> <li>Receives information from TC and provider regarding outcome of visits.</li> </ul>
		<ul style="list-style-type: none"> <li>Provider</li> </ul>	<ul style="list-style-type: none"> <li>Provides feedback to TC to complete <b><u>Community Home Visit form</u></b></li> </ul>
		<ul style="list-style-type: none"> <li>Training Center</li> </ul>	<ul style="list-style-type: none"> <li>Complete <b><u>Community Home Visit form</u></b></li> </ul>
Final Pre-Move Meeting	<ul style="list-style-type: none"> <li>Final PST meeting to review visits and plan/confirm final preparations prior to move to new home.</li> </ul>	<ul style="list-style-type: none"> <li>Individual/AR</li> </ul>	<ul style="list-style-type: none"> <li>Share information from visits.</li> </ul>
		<ul style="list-style-type: none"> <li>PST</li> </ul>	<ul style="list-style-type: none"> <li>Review <b><u>Discharge Plan and Discussion Record</u></b> and change as appropriate</li> <li>Review the <b><u>Community Home Visit form</u></b>,</li> <li>Decide if the potential provider appears to meet the individual's needs,</li> <li>Address any problems that were identified on the visits,</li> <li>Finalize projected move date, and</li> <li>Begin making any final arrangements to ensure that they are completed prior to the move.</li> </ul>
		<ul style="list-style-type: none"> <li>Provider</li> </ul>	<ul style="list-style-type: none"> <li>Shares <b><u>Waiver Plan for Supports</u></b> with CSB that includes all essential supports (might be a <b><u>60-day Assessment Plan for Supports</u></b>).</li> </ul>
		<ul style="list-style-type: none"> <li>CSB SC</li> </ul>	<ul style="list-style-type: none"> <li>Before or at the meeting, obtain and review <b><u>Waiver Plan for Supports</u></b> from provider to confirm discharge plan is incorporated in PFS.</li> <li>Before or at the meeting, CSB submits <b><u>Individual Service Authorization Requests</u></b> in IDOLS.</li> <li>If needed, schedule site review with TC Discharge Coordinator.</li> </ul>

\* denotes primary task detailed in additional chart. Documents are **bold underlined**.

\*\* In the event of barriers to D/C, a special circumstance meeting will occur and an RST referral may be initiated.

Primary Tasks and Core Responsibilities			
Task	Purpose	Roles	Core Responsibilities
		<ul style="list-style-type: none"> <li>Training Center Discharge Coordinator or designee</li> </ul>	<ul style="list-style-type: none"> <li>If needed, schedule site review with CSB.</li> <li>Confirm needed medical equipment in place</li> </ul>
		<ul style="list-style-type: none"> <li>DCM/CIM</li> </ul>	<ul style="list-style-type: none"> <li>Completes final review and ensures all steps of the moving process have been followed.</li> </ul>
Provider Site Review if needed		<ul style="list-style-type: none"> <li>CSB SC</li> </ul>	<ul style="list-style-type: none"> <li>Confirm needed medical equipment in place</li> </ul>
		<ul style="list-style-type: none"> <li>Training Center Discharge Coordinator</li> </ul>	<ul style="list-style-type: none"> <li>Confirm needed medical equipment in place</li> </ul>
Day of Move		<ul style="list-style-type: none"> <li>Training Center</li> </ul>	<ul style="list-style-type: none"> <li>Supply and review medications/prescriptions</li> <li>Provide any additional information to provider</li> <li>Complete internal TC discharge process</li> </ul>
		CSB SC	<ul style="list-style-type: none"> <li>Follows up with individual and provider</li> </ul>
		Individual/AR	<ul style="list-style-type: none"> <li>Move</li> </ul>
		Provider	<ul style="list-style-type: none"> <li>Ensure home is ready for individual to move in Begin 60 day assessment period</li> </ul>
Post-Move Monitoring (PMM)	For training center staff to work collaboratively with the CSB, provider, and CIM to: <ul style="list-style-type: none"> <li>Ensure essential and non-essential supports agreed upon in the Discharge Plan/Discussion</li> </ul>	<ul style="list-style-type: none"> <li>Training Center</li> </ul>	<ul style="list-style-type: none"> <li>3, 10 and 17 day and post 30 visits</li> <li>Contact AR to assess satisfaction</li> <li>Complete two visits in home and one at day services</li> <li>Complete <b><u>PMM Report</u></b></li> <li>Share <b><u>PMM Report</u></b> with PMMC or designee</li> </ul>
		<ul style="list-style-type: none"> <li>OL</li> </ul>	<ul style="list-style-type: none"> <li>PMM Visit by referral Complete <b><u>Report in OLIS</u></b></li> <li>Share <b><u>PMM Report</u></b> with CIM and posts in OLIS</li> </ul>
		<ul style="list-style-type: none"> <li>OHR</li> </ul>	<ul style="list-style-type: none"> <li>Visits within 60 days, 90 days of move, post one year and then as needed</li> <li>Complete <b><u>PMM Report</u></b></li> </ul>

\* denotes primary task detailed in additional chart. Documents are **bold underlined**.

\*\* In the event of barriers to D/C, a special circumstance meeting will occur and an RST referral may be initiated.

Primary Tasks and Core Responsibilities			
Task	Purpose	Roles	Core Responsibilities
	<p>Record are being provided.</p> <ul style="list-style-type: none"> <li>Monitor the individual's adjustment to his/her new home and supportive employment or day program.</li> <li>Offer additional support services to the individual, AR (where applicable), provider, and/or CSB.</li> <li>Provide necessary recommendations to the community provider and CSB to resolve identified concerns, and document steps on the post-move monitoring action plan. Recruit others who may assist; such as, CRC and HRA.</li> </ul>		<ul style="list-style-type: none"> <li>Share <b><u>PMM Report</u></b> with CIM and CSB</li> </ul>
		<ul style="list-style-type: none"> <li>CSB SC</li> </ul>	<ul style="list-style-type: none"> <li>Day 7 and monthly visits for 12 months, Then follows case management guidelines</li> <li>Share visit notes (or optional <b><u>PMM report</u></b> or <b><u>On-site Visit Tool</u></b>) with CIM.</li> <li>Optional <b><u>PMM Report</u></b> available from CIM or CRC.</li> <li>Optional <b><u>On-site Visit Tool</u></b> available online at: <a href="http://www.dbhds.virginia.gov/library/document-library/ods-pcp-20091001-opt-on-sitevisittool.doc">http://www.dbhds.virginia.gov/library/document-library/ods-pcp-20091001-opt-on-sitevisittool.doc</a></li> </ul>
		<ul style="list-style-type: none"> <li>CRC</li> </ul>	<ul style="list-style-type: none"> <li>By Referral               <ul style="list-style-type: none"> <li>Meet with individual in home setting</li> <li>Review provider <b><u>ISP/PFS</u></b></li> <li>Provide technical assistance as needed</li> <li>Complete <b><u>PMM report</u></b></li> <li>Share <b><u>PMM report</u></b> with CSB Support Coordinator (SC) via IDOLS and CIM</li> </ul> </li> </ul>

\* denotes primary task detailed in additional chart. Documents are **bold underlined**.

\*\* In the event of barriers to D/C, a special circumstance meeting will occur and an RST referral may be initiated.